form to: County Cler 1055 Monte	rey Street, D120 bispo CA 93408	Property ID: Parcel/APN # Date Reissued:
Or fax the form to: (805) 781-1111		
STATEMENT OF: LOST ASSESSMENT BALLOT		
l,	(Print Name)	do hereby state, under
penalty of perjury, the following:		
Circle One		
1.	I did not receive the assessment ballot	sent to me in the mail.
2.	I lost my ballot.	
3.	My ballot was destroyed.	
I request a second ballot be issued to me.		
Dated:		

Signature of Property Owner:

Residence Address:

Mailing Address: